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**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

DESHEFY FOR CONGRESS COMMITTEE

ADDRESS (number and street) 150 YANTIC STREET #232

Check if different than previously reported. (ACC)

NORWICH CT 06340-4296

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
STATE ▼ DISTRICT

000442681

3. IS THIS REPORT X NEW (N) OR AMENDED (A)

CT 02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)  
July 15 Quarterly Report (Q2)  
October 15 Quarterly Report (Q3)

X January 31 Year-End Report (YE)  
OCT.1-DEC.31, 2008

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)  
Convention (12C) Special (12S)

Election on M M / D D / Y Y Y Y in the State of

(c) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y in the State of

ELECTION NOV. 4, 2008

5. Covering Period 10 01 2008 through 12 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer NANCY JEAN DESHEFY

Signature of Treasurer Nancy Jean Deshefy

Date 01 17 2009

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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**FEC FORM 3**  
(Revised 02/2003)

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